

AUG. 20. 2002 4:23PM

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NO. 3038 P. 1/16

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**FACSIMILE TRANSMITTAL**

August 20, 2002

from **CLARE M. IERY**

Direct: 513-977-8192 / Fax: 513-977-8141 / cieri@dinslaw.com

**To:** ATTN: Anne Marie Baker  
**Firm:** United States Patent and Trademark Office  
**Fax Number:** 703-872-9307  
**Client Number:** 10806-48A  
**Pages:** 16  
**(including cover)**

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**AUG 21 2002**

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**OFFICIAL**

**Comments:** Please find enclosed a corrected Amendment Transmittal, Request for One-Month Extension of Time and Amendment which was filed on August 19, 2002. The correction relates to a typographical error on the Certificate of Facsimile. The date is correctly noted as August 19, 2002. Please note that the cost of the one-month extension has already been authorized to be charged to Deposit Account No. 04-1133.

Please do not hesitate to contact me should you have any questions regarding this filing or otherwise relating to this application.

Clare M. Iery

If there are any problems in receiving this transmission, please call the fax room at (513) 977-8483 immediately. Thank you.

**Notice**

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**CERTIFICATE OF FACSIMILE****PATENT**

I hereby certify that this paper is being  
transmitted via facsimile to: ATTN: Anne Marie Baker  
Box AF; Commissioner for Patents,  
Washington, DC 20231 at facsimile number  
(703) 872-9307 on August 19, 2002.

*Brandy Dicken*

**IN THE UNITED STATES PATENT & TRADEMARK OFFICE**

Applicant: Gunnar Norstedt et al : Paper No.:  
Serial No.: 08/963,288 : Group Art Unit: 1632  
Filed: November 3, 1997 : Examiner: Anne Marie Baker

For: Improvement of an Expression Vector for Production of Recombinant Proteins

Box AF  
Commissioner for Patents  
Washington, DC 20231

Dear Sir:

Transmitted herewith is an Amendment Under 37 C.F.R. 1.116 in the above-identified application.

- [X] Additional fee is required.  
[X] Also attached: One Month Extension of Time

The fee has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUS PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	40	42	0	x \$18 =	\$-0-
Independent Claims	11	11	0	x \$84 =	\$-0-
One Month Extension of Time					\$110.00
TOTAL FEE DUE					\$110.00

- [X] Please charge my Deposit Account No. 04-1133 in the amount of \$110.00
- [X] The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment, to Deposit Account No. 04-1133, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

*Clare M. Iery*

Clare M. Iery, Reg. No. P-51,823  
Attorneys for Applicants  
DINSMORE & SHOHL LLP  
1900 Chemed Center  
255 East Fifth Street  
Cincinnati, Ohio 45202  
(513) 977-8192

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